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| Fill in this information to identify your case: | | |
|---|---------------------------------|---------------------------------|
| United States Bankruptcy Court for the: | | |
| NORTHERN DISTRICT OF ILLINOIS | _ | |
| Case number (if known) | _ Chapter you are filing under: | |
| | Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ☐ Chapter 13 | Check if this an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Par | t 1: Identify Yourself | | |
|-----|--|---|---|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name | | |
| | Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. | Geoppetto First name O. Middle name Robinson Last name and Suffix (Sr., Jr., II, III) | First name Middle name Last name and Suffix (Sr., Jr., II, III) |
| 2. | All other names you have used in the last 8 years | | |
| | Include your married or maiden names. | | |
| 3. | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | xxx-xx-1337 | |

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Debtor 1 Geoppetto O. Robinson

Case number (if known)

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
|----|--|---|--|
| 4. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names | ■ I have not used any business name or EINs. Business name(s) | ☐ I have not used any business name or EINs. Business name(s) |
| | doing business as names | EINs | EINs |
| 5. | Where you live | | If Debtor 2 lives at a different address: |
| | | 366 W. 17th Street Chicago Heights, IL 60411 Number, Street, City, State & ZIP Code | Number, Street, City, State & ZIP Code |
| | | Cook County | County |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
| | | Number, P.O. Box, Street, City, State & ZIP Code | Number, P.O. Box, Street, City, State & ZIP Code |
| 6. | Why you are choosing this district to file for | Check one: | Check one: |
| | bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. |
| | | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) |
| | | | |

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Debtor 1 Geoppetto O. Robinson

Case number (if known)

| ar | t 2: Tell the Court About | Your E | Bankruptcy Ca | ise | | | | | |
|-----|---|-----------|----------------|----------------------------------|---|---|------------------|--|--|
| 7. | The chapter of the Bankruptcy Code you are choosing to file under | | | | n of each, see <i>Notice Required by</i> of page 1 and check the appropriat | 11 U.S.C. § 342(b) for Individuals Filing for te box. | Bankruptcy | | |
| | choosing to file under | Chapter 7 | | | | | | | |
| | | | Chapter 11 | | | | | | |
| | | | Chapter 12 | | | | | | |
| | | | Chapter 13 | | | | | | |
| 3. | How you will pay the fee | • | about how yo | u may pay. Ty attorney is sub | pically, if you are paying the fee yo | ck with the clerk's office in your local court fourself, you may pay with cash, cashier's calf, your attorney may pay with a credit car | heck, or money | | |
| | | | | | | on, sign and attach the Application for Indiv | viduals to Pay | | |
| | | | I request tha | t my fee be w | | n only if you are filing for Chapter 7. By law | | | |
| | | | applies to you | ur family size a | nd you are unable to pay the fee i | our income is less than 150% of the official n installments). If you choose this option, y cial Form 103B) and file it with your petition | ou must fill out | | |
|). | Have you filed for bankruptcy within the | ■ N | lo. | | | | | | |
| | last 8 years? | ПΥ | es. | | | | | | |
| | | | District | | When | | | | |
| | | | District | | When | Case number | | | |
| | | | District | | When | Case number | | | |
| 0. | Are any bankruptcy cases pending or being | ■ N | lo | | | | | | |
| | filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ΠY | es. | | | | | | |
| | | | Debtor | | | Relationship to you | | | |
| | | | District | | When | Case number, if known | | | |
| | | | Debtor | | | Relationship to you | | | |
| | | | District | | When | Case number, if known | | | |
| 11. | Do you rent your residence? | ■ N | lo. Go to l | ine 12. | | | | | |
| | | ПΥ | es. Has yo | ur landlord ob | tained an eviction judgment agains | st you? | | | |
| | | | | No. Go to line | : 12. | | | | |
| | | | | Yes. Fill out II this bankrupto | | Judgment Against You (Form 101A) and fil | e it as part of | | |
| | | | | | | | | | |

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| Debtor 1 | Geoppetto O. Robinson | Document | Page 4 of 58 | Case number (if known) | |
|----------|-----------------------|----------|--------------|------------------------|--|
|----------|-----------------------|----------|--------------|------------------------|--|

| art | Report About Any Bu | sinesses ` | You Own | as a Sole Proprietor |
|-----|---|---------------|-----------------------------|---|
| 12. | Are you a sole proprietor of any full- or part-time business? | ■ No. | Go to | Part 4. |
| | | ☐ Yes. | Name | and location of business |
| | A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | Name | of business, if any |
| | If you have more than one sole proprietorship, use a separate sheet and attach | | Numb | er, Street, City, State & ZIP Code |
| | it to this petition. | | Check | k the appropriate box to describe your business: |
| | | | | Health Care Business (as defined in 11 U.S.C. § 101(27A)) |
| | | | | Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) |
| | | | | Stockbroker (as defined in 11 U.S.C. § 101(53A)) |
| | | | | Commodity Broker (as defined in 11 U.S.C. § 101(6)) |
| | | | | None of the above |
| 13. | Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? | deadlines | s. If you in s, cash-flo | der Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate dicate that you are a small business debtor, you must attach your most recent balance sheet, statement of ow statement, and federal income tax return or if any of these documents do not exist, follow the procedure 1)(B). |
| | For a definition of small | ■ No. | I am n | not filing under Chapter 11. |
| | business debtor, see 11 U.S.C. § 101(51D). | □ No. | I am fi Code. | iling under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy |
| | | ☐ Yes. | I am fi | iling under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. |
| art | 4: Report if You Own or | Have Any | Hazardo | ous Property or Any Property That Needs Immediate Attention |
| 14. | Do you own or have any | ■ No. | | |
| | property that poses or is alleged to pose a threat of imminent and | ■ No. ☐ Yes. | What is t | the hazard? |
| | identifiable hazard to public health or safety? Or do you own any property that needs immediate attention? | | | liate attention is why is it needed? |
| | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | | Where is | s the property? Number, Street, City, State & Zip Code |
| | | | | · · · · · · · · · · · · · · · · · · · |

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Debtor 1 Geoppetto O. Robinson

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

| | | pa | |
|--|--|----|--|
| | | | |
| | | | |

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

| | Case 18-0 | 08078 | Doc 1 | Document | Entered 03/20/18 17 | :27:17 Desc Main |
|-----|--|--|--------------------------------------|--|--|---|
| Deb | otor 1 Geoppetto O. Rob | inson | | | Page 6 of 58 Case numb | OET (if known) |
| Par | t 6: Answer These Quest | ions for R | eporting Pur | rposes | | |
| 16. | What kind of debts do you have? | 16a. | | | r debts? Consumer debts are de mily, or household purpose." | fined in 11 U.S.C. § 101(8) as "incurred by an |
| | | | ☐ No. Go to | to line 16b. | | |
| | | | Yes. Go | to line 17. | | |
| | | 16b. | Are your de money for a | ebts primarily business a business or investment of | debts? Business debts are debts or through the operation of the bu | s that you incurred to obtain siness or investment. |
| | | | ☐ No. Go to | to line 16c. | | |
| | | | ☐ Yes. Go | to line 17. | | |
| | | 16c. | State the typ | pe of debts you owe that a | are not consumer debts or busine | ess debts |
| 17. | Are you filing under Chapter 7? | □ No. | I am not filin | ng under Chapter 7. Go to | line 18. | |
| | Do you estimate that after any exempt property is excluded and | ■ Yes. | | | stimate that after any exempt pro o distribute to unsecured creditors | perty is excluded and administrative expenses s? |
| | administrative expenses are paid that funds will | | ■ No | | | |
| | be available for distribution to unsecured creditors? | | ☐ Yes | | | |
| 18. | How many Creditors do | ■ 1-49 | | | 1 ,000-5,000 | 2 5,001-50,000 |
| | you estimate that you owe? | □ 50-99 | | | 5001-10,000 | □ 50,001-100,000 |
| | | ☐ 100-1 ☐ 200-9 | | L | 10,001-25,000 | ☐ More than100,000 |
| 19. | How much do you | □ \$0 - \$ | \$50,000 | | ☐ \$1,000,001 - \$10 million | ☐ \$500,000,001 - \$1 billion |
| | estimate your assets to be worth? | | 001 - \$100,000 | · _ | \$10,000,001 - \$50 million | □ \$1,000,000,001 - \$10 billion |
| | | □ \$100,001 - \$500,000 □ \$500,001 - \$1 million | | - | ☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million | ☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion |
| | | □ \$500 | ,001 - \$1 IIIIIIC | 011 | | |
| 20. | How much do you estimate your liabilities | □ \$0 - \$ | | | \$1,000,001 - \$10 million | □ \$500,000,001 - \$1 billion |
| | to be? | | 001 - \$100,00 ,001 - \$500,00 | _ | ☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million | □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion |
| | | | ,001 - \$300,00 ,001 - \$1 millio | | □ \$100,000,001 - \$500 million | ☐ More than \$50 billion |
| Par | t7: Sign Below | | | | | |
| For | you | I have ex | xamined this p | petition, and I declare und | ler penalty of perjury that the info | rmation provided is true and correct. |
| | | | | | | e, under Chapter 7, 11,12, or 13 of title 11, choose to proceed under Chapter 7. |
| | | | | | or agree to pay someone who is no required by 11 U.S.C. § 342(b). | ot an attorney to help me fill out this |
| | | I request | t relief in acco | ordance with the chapter c | of title 11, United States Code, sp | ecified in this petition. |
| | | bankrupt and 357 | tcy case can r | result in fines up to \$250,0 | | or property by fraud in connection with a years, or both. 18 U.S.C. §§ 152, 1341, 1519, |
| | | Geoppe | etto O. Robi re of Debtor 1 | oinson | Signature of Debt | or 2 |

Executed on

MM / DD / YYYY

Executed on March 20, 2018 MM / DD / YYYY

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Debtor 1 Geoppetto O. Robinson Page 7 01 58

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Kevin D. Rouse ARDC | Date | March 20, 2018 |
|--|---------------|------------------------|
| Signature of Attorney for Debtor | | MM / DD / YYYY |
| M. 1. D. D ADDO #0004004 | | |
| Kevin D. Rouse ARDC #6284394 | | |
| Printed name | | |
| Ledford, Wu & Borges, LLC | | |
| Firm name | | |
| 105 W. Madison | | |
| 23rd Floor | | |
| Chicago, IL 60602 | | |
| Number, Street, City, State & ZIP Code | | |
| Contact phone 312-853-0200 | Email address | notice@billbusters.com |
| #6284394 IL | | |
| Bar number & State | | |

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| | | Docume | ent Page 8 of 58 | |
|--------------------|--------------------------|-------------------|------------------|--------------------------------------|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Geoppetto O. Rol | binson | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| Spouse if, filing) | First Name | Middle Name | Last Name | |
| Jnited States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| if known) | | | | ☐ Check if this is an amended filing |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| | | Your as | ssets of what you own |
|-----|--|--------------|-------------------------------|
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 69,000.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 7,050.00 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 76,050.00 |
| Par | t 2: Summarize Your Liabilities | | |
| | | | abilities t you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 79,544.71 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 0.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$ | 60,033.26 |
| | Your total liabilities | \$ | 139,577.97 |
| Par | t 3: Summarize Your Income and Expenses | | |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$ | 1,503.00 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 1,500.00 |
| Par | t 4: Answer These Questions for Administrative and Statistical Records | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you | ur other sch | nedules. |
| 7. | ■ Yes What kind of debt do you have? | | |
| | | | |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

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Debtor 1 Geoppetto O. Robinson

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

116.00 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Total claim | |
|--|-------------|------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 0.00 |

| | Case | e 18-0807 | 8 Doc 1 | Filed 03/20/18 Document | Entered 03/20/1 | .8 17:27:1 | .7 Des | sc Main |
|--------------|---|---|---|--|---|---|--|--|
| Fill | in this informati | ion to identify | your case and t | | | | | |
| Deb | otor 1 | Geoppetto (| D. Robinson | | | | | |
| | | First Name | Middl | e Name | Last Name | | | |
| | otor 2 use, if filing) | First Name | Middl | e Name | Last Name | | | |
| Unit | ted States Bankru | uptcy Court for | the: NORTHER | RN DISTRICT OF ILLI | NOIS | | | |
| | se number | | | | _ | | | ☐ Check if this is an amended filing |
| n ea hink | it fits best. Be as mation. If more sp wer every question | A/B: Pi grately list and d is complete and pace is needed, i. | roperty lescribe items. List accurate as possib attach a separate s | le. If two married peopl heet to this form. On th | an asset fits in more than one e are filing together, both are ne top of any additional pages wn or Have an Interest In | equally respon | sible for su | pplying correct |
| | No. Go to Part 2. Yes. Where is the | e property? | | | | | | |
| | | | | | | | | |
| 1.1 | 366 W 17th S | Street | | What is the propert | | | | |
| 1.1 | 366 W 17th S Street address, if ava | | scription | Single-family Duplex or mu | | the amount of | f any secured | ims or exemptions. Put d claims on Schedule D: ns Secured by Property. |
| 1.1 | | ailable, or other des | 60411-0000 | Single-family Duplex or mu Condominium Manufactured Land | home Ilti-unit building n or cooperative d or mobile home | the amount of Creditors Who Current value entire proper | f any secured o Have Clain e of the rty? | d claims on Schedule D: ns Secured by Property. Current value of the portion you own? |
| 1.1 | Street address, if ava | ailable, or other des | | Single-family Duplex or mu Condominium Manufactured Land Investment pr | home Ilti-unit building n or cooperative d or mobile home | Current value entire proper \$69 | e of the tty? | current value of the portion you own? \$69,000.00 |
| 1.1 | Street address, if ava | ailable, or other des | 60411-0000 | Single-family Duplex or mu Condominium Manufactured Land Investment pi Timeshare Other De | home Ilti-unit building n or cooperative d or mobile home | Current value entire proper \$69 | f any secured of Have Claim e of the ety? ,000.00 nature of you simple, tena | d claims on Schedule D: ns Secured by Property. Current value of the portion you own? \$69,000.00 |
| 1.1 | Street address, if ava | ailable, or other des | 60411-0000 | Single-family Duplex or mu Condominium Manufactured Land Investment pi Timeshare Other De | home Ilti-unit building n or cooperative d or mobile home roperty ebtor's Residence at in the property? Check one | Current value entire proper \$69 Describe the (such as fee | f any secured of Have Claim e of the ety? ,000.00 nature of you simple, tena | current value of the portion you own? \$69,000.00 |
| 1.1 | Chicago Heig City Cook | ailable, or other des | 60411-0000 | Single-family Duplex or mu Condominium Manufactured Land Investment pr Timeshare Other De Who has an interes | home Ilti-unit building In or cooperative Id or mobile home Inoperty Inoperty It in the property? Check one | Current value entire proper \$69 Describe the (such as fee | f any secured of Have Claim e of the ety? ,000.00 nature of you simple, tena | current value of the portion you own? \$69,000.00 |
| 1.1 | Street address, if ava | ailable, or other des | 60411-0000 | Single-family Duplex or mu Condominium Manufactured Land Investment pt Timeshare Other Deter Debtor 1 only | home Ilti-unit building n or cooperative d or mobile home roperty ebtor's Residence at in the property? Check one | Current value entire proper \$69 Describe the (such as fee a life estate), | e of the tty? ,000.00 nature of you simple, tenail find known. | current value of the portion you own? \$69,000.00 |

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....=>

\$69,000.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

| Debtor | | Case 18 | -08078 Doc O. Robinson | 1 Filed 03/20/18 Document | Page 11 of 58 | 0/18 17:27:17 ase number (if known) | Desc Main |
|------------|--------------------|---------------|---|--|----------------------------|-------------------------------------|--|
| 3. Cars | _ | | | vehicles, motorcycles | | • • | |
| | • | , , | , , , , | | | | |
| | | | | | | | |
| ■ Ye | es | | | | | | |
| | | | | | | De set de doct es es | and deleter as successful Dut |
| 3.1 | Make: | Ford | | Who has an interest in th | e property? Check one | | ured claims or exemptions. Put secured claims on Schedule D: |
| | Model: | Explore | r | ■ Debtor 1 only | | | ve Claims Secured by Property. |
| | Year: | 2008 | | Debtor 2 only | | Current value of t | he Current value of the |
| | | mate mileage: | 136,000 | Debtor 1 and Debtor 2 | only | entire property? | portion you own? |
| - | | formation: | | At least one of the debt | ors and another | | |
| | Not O _l | perable Ne | eds Motor | Check if this is comm (see instructions) | unity property | \$2,400 | .00 \$2,400.00 |
| | es d the d | | | wn for all of your entries fi e that number here | | | \$2,400.00 |
| | | | onal and Household | | | | |
| Do you | u own | or have any | legal or equitable i | nterest in any of the follow | ving items? | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| Exa □ N | amples: No | | furnishings ances, furniture, linen | ns, china, kitchenware | | | |
| | | | Misc used hou | sehold goods and furn | ishinas | | \$2,977.00 |
| | amples: No | Televisions | III phones, cameras, | deo, stereo, and digital equi media players, games DVD Player and Cell P | | ers, scanners; music co | ollections; electronic devices \$1,000.00 |
| | | | | - | | | |
| Exa | amples: No | | d figurines; paintings tions, memorabilia, c | · · · · · · · · · · · · · · · · · · · | oks, pictures, or other ar | t objects; stamp, coin, | or baseball card collections; |
| | | | Books & Fami | ly Pictures | | | \$50.00 |
| Exa ■ N | imples: No | | 0 1 | and other hobby equipment; | bicycles, pool tables, go | lf clubs, skis; canoes a | and kayaks; carpentry tools; |

Document Page 12 of 58 Case number (if known) Debtor 1 Geoppetto O. Robinson 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ■ No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe..... \$450.00 **Necessary Wearing Apparel** 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver Yes. Describe..... \$150.00 Costume Jewelry 13. Non-farm animals Examples: Dogs, cats, birds, horses ■ No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$4.627.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition □ No Cash \$12.00 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: ■ Yes..... 17.1. Checking Chase Bank \$11.00 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No ☐ Yes..... Institution or issuer name:

Official Form 106A/B Schedule A/B: Property page 3

Case 18-08078

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Case number (if known) Document Geoppetto O. Robinson Debtor 1 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ■ No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ■ No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses No ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No

☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years......

29. Family support

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

☐ Yes. Give specific information.....

| Debtor 1 | Case 18-0807 | | Filed 03/20/18 Document | Entered 03/20/18 17:27:17 Page 14 of 58 Case number (if known) | Desc Main | | | |
|--------------|---|----------------------------------|--|--|----------------------------|--|--|--|
| | amounts someone ow | es you ability insurance | | efits, sick pay, vacation pay, workers' compe | nsation, Social Security | | | |
| 31. Interes | Yes. Give specific information 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance | | | | | | | |
| ☐ Yes. | . Name the insurance co C | mpany of each p Company name: | olicy and list its value. | Beneficiary: | Surrender or refund value: | | | |
| If you some | | living trust, exped | a someone who has die ct proceeds from a life ins | d surance policy, or are currently entitled to rec | eive property because | | | |
| Exam ■ No | 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No Yes. Describe each claim | | | | | | | |
| ■ No | contingent and unliqui | | every nature, including | g counterclaims of the debtor and rights to | o set off claims | | | |
| ■ No | nancial assets you did . Give specific information | | | | | | | |
| | | • | • | ny entries for pages you have attached | \$23.00 | | | |
| Part 5: De | escribe Any Business-Rela | ated Property You | Own or Have an Interest I | n. List any real estate in Part 1. | | | | |
| No. G | own or have any legal or o to Part 6. Go to line 38. | equitable interest | in any business-related pr | operty? | | | | |
| | escribe Any Farm- and Co you own or have an interest | | Related Property You Owr | n or Have an Interest In. | | | | |
| ■ No | u own or have any lega . Go to Part 7. s. Go to line 47. | al or equitable ir | nterest in any farm- or c | ommercial fishing-related property? | | | | |
| Part 7: | Describe All Property | ou Own or Have a | an Interest in That You Did | Not List Above | | | | |

53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership

 $\hfill \square$ Yes. Give specific information.......

54. Add the dollar value of all of your entries from Part 7. Write that number here

\$0.00

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Case number (if known) Document Debtor 1 Geoppetto O. Robinson

| Part | 8: List the Totals of Each Part of this Form | | | |
|------|--|------------|------------------------------|-------------|
| 55. | Part 1: Total real estate, line 2 | | | \$69,000.00 |
| 56. | Part 2: Total vehicles, line 5 | \$2,400.00 | | _ |
| 57. | Part 3: Total personal and household items, line 15 | \$4,627.00 | | |
| 58. | Part 4: Total financial assets, line 36 | \$23.00 | | |
| 59. | Part 5: Total business-related property, line 45 | \$0.00 | | |
| 60. | Part 6: Total farm- and fishing-related property, line 52 | \$0.00 | | |
| 61. | Part 7: Total other property not listed, line 54 + | \$0.00 | | |
| 62. | Total personal property. Add lines 56 through 61 | \$7,050.00 | Copy personal property total | \$7,050.00 |
| 63. | Total of all property on Schedule A/B. Add line 55 + line 62 | | | \$76,050.00 |

Official Form 106A/B Schedule A/B: Property page 6 Case 18-08078 Doc 1 Filed 03/20/18 Entered 03/20/18 17:27:17 Desc Main

| | | DOMING | | | |
|---------------------|--------------------------|-------------------|-------------|---|------------------------------------|
| Fill in this infor | mation to identify your | case: | | | |
| Debtor 1 | Geoppetto O. Ro | binson | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| Case number | | | | | |
| (if known) | | | | _ | Check if this is an amended filing |

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Part 1: | Identify th | e Property | You Claim | as Exempt |
|----------|-------------|------------|-------------|---------------|
| I all I. | IUCIIUIV U | CIIODEILV | i ou ciaiii | I as Excilibl |

| 1. | Which set of exemption | s are vou claimin | a? Check one onl | v. even if vour st | oouse is filing with you. |
|----|------------------------|-------------------|------------------|--------------------|---------------------------|
| | | | | | |

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Schedule A/B that lists this property | portion you own | Ame | ount of the exemption you claim | Specific laws that allow exemption |
|--|-------------------------------------|-----|---|------------------------------------|
| | Copy the value from Schedule A/B | Che | eck only one box for each exemption. | |
| 366 W 17th Street Chicago Heights, IL 60411 Cook County | \$69,000.00 | | \$15,000.00 | 735 ILCS 5/12-901 |
| Line from Schedule A/B: 1.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| 2008 Ford Explorer 136,000 miles Not Operable Needs Motor | \$2,400.00 | | \$2,400.00 | 735 ILCS 5/12-1001(c) |
| Line from Schedule A/B: 3.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| Misc used household goods and furnishings | \$2,977.00 | | \$2,977.00 | 735 ILCS 5/12-1001(b) |
| Line from Schedule A/B: 6.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| 1 Television, 1 DVD Player and Cell Phone. | \$1,000.00 | | \$1,000.00 | 735 ILCS 5/12-1001(b) |
| Line from Schedule A/B: 7.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| Books & Family Pictures Line from Schedule A/B: 8.1 | \$50.00 | | \$50.00 | 735 ILCS 5/12-1001(a) |
| EIRO HOITI GONGGARO / V.D. GIT | | | 100% of fair market value, up to any applicable statutory limit | |

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Case number (if known)

| De | Bioli Geoppello O. Robinson | | | Case number (ii known) | |
|----|---|--------------------------------------|---------|---|------------------------------------|
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Am | ount of the exemption you claim | Specific laws that allow exemption |
| | | Copy the value from Schedule A/B | Che | | |
| | Necessary Wearing Apparel Line from Schedule A/B: 11.1 | \$450.00 | | \$450.00 | 735 ILCS 5/12-1001(a) |
| | Zino nom concedero / v.S. 1111 | | | 100% of fair market value, up to any applicable statutory limit | |
| | Costume Jewelry Line from Schedule A/B: 12.1 | \$150.00 | | \$150.00 | 735 ILCS 5/12-1001(a) |
| | Line Holli Schedule A/B. 12.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| | Cash Line from Schedule A/B: 16.1 | \$12.00 | | \$12.00 | 735 ILCS 5/12-1001(b) |
| | Line Holli Schedule A.B. 19.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| | Checking: Chase Bank Line from Schedule A/B: 17.1 | \$11.00 | | \$11.00 | 735 ILCS 5/12-1001(b) |
| | Ellic Holli Galleddic Alb. 1111 | | | 100% of fair market value, up to any applicable statutory limit | |
| 3. | Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every | | | led on or after the date of adjustmer | nt.) |
| | ■ No | | | | |
| | ☐ Yes. Did you acquire the property cove | red by the exemption wi | ithin 1 | ,215 days before you filed this case | ? |
| | □ No | | | | |
| | ☐ Yes | | | | |

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| Oa | 30 10 00010 | Document | Page 18 | of 58 | 27.17 DC50 N | nam. |
|--|------------------------------|---|-------------------|--|--|--------------------------|
| Fill in this inforn | nation to identify you | | | | | |
| Debtor 1 | Geoppetto O. R | ohinson | | | | |
| 20010. | First Name | Middle Name | Last Name | | | |
| Debtor 2 | First Name | Middle Mana | LastNama | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | | |
| United States Bar | nkruptcy Court for the: | NORTHERN DISTRICT OF ILL | INOIS | | | |
| Case number | | | | | ☐ Check | if this is an |
| | | | | | ameno | ded filing |
| Official Form | 106D | | | | | |
| | | Who Have Claims | Sacurad | Lby Proport | \ | 12/15 |
| Scriedule | D. Creditors | Wild Have Claims | <u> </u> | i by Propert | <u>y</u> | 12/13 |
| | | If two married people are filing togethout, number the entries, and attach it | | | | |
| . Do any creditors | have claims secured by | y your property? | | | | |
| ☐ No. Check | this box and submit the | his form to the court with your other | schedules. Yo | u have nothing else t | o report on this form. | |
| _ | all of the information | | | | | |
| Part 1: List Al | I Secured Claims | | | | | |
| | | more than one secured claim, list the cre | ditor senarately | Column A | Column B | Column C |
| for each claim. If m | ore than one creditor has | s a particular claim, list the other creditors cal order according to the creditor's name | s in Part 2. As | Amount of claim Do not deduct the value of collateral. | Value of collateral that supports this claim | Unsecured portion If any |
| 2.1 Wells Far | go | Describe the property that secures t | the claim: | \$79,544.71 | \$69,000.00 | \$10,544.71 |
| Creditor's Name | 9 | 366 W 17th Street Chicago H | leights, | | | |
| P.O.Box 5 | :042 | IL 60411 Cook County | | | | |
| Sioux Fall | | As of the date you file, the claim is: | Check all that | | | |
| 57117-594 | • | apply. Contingent | | | | |
| | , City, State & Zip Code | Unliquidated | | | | |
| rumber, en ee, | only, chance a zip code | ☐ Disputed | | | | |
| Who owes the de | bt? Check one. | Nature of lien. Check all that apply. | | | | |
| ■ Debtor 1 only | | ☐ An agreement you made (such as r | mortgage or seci | ured | | |
| Debtor 2 only | | car loan) | 3.3. | | | |
| Debtor 1 and De | htor 2 only | ☐ Statutory lien (such as tax lien, med | chanic's lien) | | | |
| | ne debtors and another | ☐ Judgment lien from a lawsuit | orialiio o ilori, | | | |
| ☐ Check if this cl | | Other (including a right to offset) | Mortgage | | | |
| community de | | — Other (including a right to onset) | | | | |
| Date debt was incu | urred | Last 4 digits of account numl | ber | | | |
| | | | | | | |
| A LLG . L.H. | | | | \$70.5 4 | 14.74 | |
| | = | olumn A on this page. Write that numl the dollar value totals from all pages. | | \$79,54 | | |
| Write that number | | the donar value totals from an pages. | | \$79,54 | 14.71 | |
| Part 2: List Oth | pers to Be Notified fo | r a Debt That You Already Listed | | | | |
| • | | • | | alasa da liata dia Dant 4 | | 4! |
| trying to collect fro than one creditor f | om you for a debt you o | e notified about your bankruptcy for a we to someone else, list the creditor i t you listed in Part 1, list the additiona is page. | n Part 1, and th | en list the collection a | gency here. Similarly, if | you have more |
| | | _ | | | | |
| Name, Numb Wells Far | per, Street, City, State & 2 | Zip Code | On whic | h line in Part 1 did you e | nter the creditor? 2.1 | |
| Collection | n Servicing | | Last 4 di | igits of account number | _ | |
| 1 Home C | Jampus | | | | | |

Des Moines, IA 50328

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| | | Document | Page 19 of 58 | |
|---|---|--|---|--|
| Fill in this | s information to identify your | case: | | |
| Debtor 1 | Geoppetto O. Rol | oinson | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 (Spouse if, fi | ling) First Name | Middle Name | Last Name | |
| United Sta | ates Bankruptcy Court for the: | NORTHERN DISTRICT OF IL | LINOIS | |
| Case nun (if known) | nber | | | Check if this is an amended filing |
| | Form 106E/F ule E/F: Creditors W | ho Have Unsecured | Claims | 12/15 |
| ny execut schedule G schedule D eft. Attach ame and c | ory contracts or unexpired leases Executory Contracts and Unexp Creditors Who Have Claims Sec the Continuation Page to this pag case number (if known). | that could result in a claim. Also ired Leases (Official Form 106G). I ured by Property. If more space is e. If you have no information to re | TY claims and Part 2 for creditors with NONPRIORITY list executory contracts on Schedule A/B: Property (O Do not include any creditors with partially secured cla needed, copy the Part you need, fill it out, number the eport in a Part, do not file that Part. On the top of any a | fficial Form 106A/B) and on ims that are listed in e entries in the boxes on the |
| Part 1: | List All of Your PRIORITY Un | | | |
| | y creditors have priority unsecure | d claims against you? | | |
| | . Go to Part 2. | | | |
| ☐ Ye | | | | |
| Part 2: | List All of Your NONPRIORIT | Y Unsecured Claims | | |
| 3. Do an | y creditors have nonpriority unsec | cured claims against you? | | |
| ☐ No | . You have nothing to report in this p | art. Submit this form to the court with | your other schedules. | |
| Yes | 5. | | | |
| unsecu | ured claim, list the creditor separately ne creditor holds a particular claim, I | / for each claim. For each claim lister | he creditor who holds each claim. If a creditor has more d, identify what type of claim it is. Do not list claims already have more than three nonpriority unsecured claims fill out | y included in Part 1. If more |
| | | | | Total claim |
| | merican General Finance | Last 4 digits of acc | count number | \$1,255.00 |
| A 1 2 | onpriority Creditor's Name ttn: Legal Department 999M1139454 0 N. Clark St., Suite 2600 chicago, IL 60606 | When was the deb | t incurred? | _ |
| N | umber Street City State Zlp Code /ho incurred the debt? Check one. | As of the date you | file, the claim is: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | At least one of the debtors and and | | RITY unsecured claim: | |
| | Check if this claim is for a comi | □ | | |
| de | ebt the claim subject to offset? | | ing out of a separation agreement or divorce that you did rains | not |
| | No | <u>-</u> ' ' ' | n or profit-sharing plans, and other similar debts | |
| |] _{Yes} | Other. Specify | Loan | |
| | | | | |

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Debtor 1 Geoppetto O. Robinson Case number (if know) 4.2 \$1,485.00 Capital One Last 4 digits of account number 1318 Nonpriority Creditor's Name Attn: General Opened 02/15 Last Active Correspondence/Bankruptcy When was the debt incurred? 5/30/17 Po Box 30285 Salt Lake City, UT 84130 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No lacktriangled Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes 4.3 Cardworks/CW Nexus Last 4 digits of account number 7472 \$1,497.00 Nonpriority Creditor's Name Attn: Bankruptcy Opened 02/14 Last Active Po Box 9201 When was the debt incurred? 5/26/17 Old Bethpage, NY 11804 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes 4.4 \$1,520.00 Cbusasears Last 4 digits of account number 4740 Nonpriority Creditor's Name Citicorp Credit Srvs/Centralized Opened 03/15 Last Active **Bankrup** When was the debt incurred? 5/26/17 Po Box 790040 Saint Louis, MO 63179 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge Account ☐ Yes

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Debtor 1 Geoppetto O. Robinson Case number (if know) 4.5 \$291.44 Comcast Last 4 digits of account number 8065 Nonpriority Creditor's Name PO Box 3001 When was the debt incurred? Southeastern, PA 19398 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Utility 4.6 **Comenity Bank/Carsons** Last 4 digits of account number 1690 \$3,728.00 Nonpriority Creditor's Name Opened 04/14 Last Active Po Box 182125 When was the debt incurred? 5/26/17 Columbus, OH 43218 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Charge Account** Other. Specify 4.7 **Comenity Capital Bank/HSN** Last 4 digits of account number 8042 \$1,887.00 Nonpriority Creditor's Name Opened 08/16 Last Active Attn: Bankruptcy Po Box 182125 When was the debt incurred? 5/26/17 Columbus, OH 43218 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Charge Account

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Case number (if know)

| Debtor | 1 Geoppetto O. Robinson | | Case number (if know) | |
|--------|--|--|---|------------|
| 4.8 | First National Credit Card/Legacy | Last 4 digits of account number | 5010 | \$447.00 |
| | Nonpriority Creditor's Name First National Credit Card Po Box 5097 Sioux Falls, SD 51117 | When was the debt incurred? | Opened 04/14 Last Active 6/11/17 | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| | Debtor 1 only | Contingent | | |
| | ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only | ☐ Unliquidated☐ Disputed | | |
| | ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt | Type of NONPRIORITY unsecured ☐ Student loans | | |
| | Is the claim subject to offset? | report as priority claims | aration agreement or divorce that you did not | |
| | ■ No | ☐ Debts to pension or profit-sharin | | |
| | Yes | Other. Specify Credit Card | 1 | |
| 4.9 | First Premier Bank Nonpriority Creditor's Name | Last 4 digits of account number | 9293 | \$1,164.00 |
| | 601 S Minnesota Ave Sioux Falls, SD 57104 | When was the debt incurred? | Opened 04/14 Last Active 6/10/17 | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| | Yes | Other. Specify Credit Card | 1 | |
| 4.1 | First Premier Bank Nonpriority Creditor's Name | Last 4 digits of account number | 8456 | \$774.00 |
| | 601 S Minnesota Ave Sioux Falls, SD 57104 | When was the debt incurred? | Opened 05/15 Last Active 6/10/17 | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans ☐ Obligations arising out of a sepa | aration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | and not | |
| | ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| | □ Yes | ■ Other. Specify Credit Card | I | |
| | | | | |

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Debtor 1 Geoppetto O. Robinson Case number (if know) 4.1 \$722.00 First Savings Credit Card 6982 Last 4 digits of account number Nonpriority Creditor's Name Opened 05/14 Last Active Po Box 5019 When was the debt incurred? 5/26/17 Sioux Falls, SD 57117 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify **Credit Card Guardian Protection Services** 2413 \$525.82 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 174 Thorn Hill Road Warrendale, PA 15086 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed ☐ Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Debt Owed** Other. Specify 4.1 Jared-galleria/genesis 2447 \$625.00 Last 4 digits of account number 3 Nonpriority Creditor's Name Opened 01/17 Last Active 15220 Nw Greenbrier, Ste When was the debt incurred? 3/06/18 Beaverton, OR 97006 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account ☐ Yes

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Debtor 1 Geoppetto O. Robinson Case number (if know) 4.1 \$726.00 **Kay Jewelers** 9626 Last 4 digits of account number 4 Nonpriority Creditor's Name Attn: Bankruptcy Opened 08/16 Last Active When was the debt incurred? Po Box 1799 6/10/17 Akron, OH 44309 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge Account ☐ Yes 4.1 Kohls/Capital One 0906 \$607.00 Last 4 digits of account number 5 Nonpriority Creditor's Name **Kohls Credit** Opened 08/16 Last Active Po Box 3120 When was the debt incurred? 3/02/17 Milwaukee, WI 53201 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge Account ☐ Yes 4.1 Lendup Card Services I 9148 \$799.00 Last 4 digits of account number 6 Nonpriority Creditor's Name Opened 10/16 Last Active 225 Bush St Ste 1100 When was the debt incurred? 6/11/17 San Francisco, CA 94104 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes

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Debtor 1 Geoppetto O. Robinson Case number (if know) 4.1 Midnight Velvet 3290 \$2,038.00 Last 4 digits of account number Nonpriority Creditor's Name Swiss Colony/Midnight Velvet Opened 02/14 Last Active When was the debt incurred? 1112 7th Ave 6/10/17 Monroe, WI 53566 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge Account ☐ Yes 4.1 **NCB** 8744 \$2,860.00 Last 4 digits of account number 8 Nonpriority Creditor's Name Attn: Bankruptcy **Opened 11/17** When was the debt incurred? One Allied Dr Trevose, PA 19053 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts **Factoring Company Account Republic** ☐ Yes Other. Specify **Bank Trust Co** 4.1 **Nissan Motor Acceptanc** 0001 \$9,525.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 06/16 Last Active Po Box 660360 When was the debt incurred? 6/13/17 Dallas, TX 75266 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

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☐ Yes

Other. Specify Automobile

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Case number (if know) Debtor 1 Geoppetto O. Robinson 4.2 Qvc \$1,600.00 Last 4 digits of account number 0 Nonpriority Creditor's Name 1200 Wilson Drive When was the debt incurred? West Chester, PA 19380 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify Other 4.2 Santander Consumer USA 1000 Last 4 digits of account number \$8,964.00 Nonpriority Creditor's Name 5201 Rufe Snow Drive Opened 03/15 Last Active Suite 400 When was the debt incurred? 9/05/17 North Richland Hills, TX 76180 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.2 Syncb/car Care Midas 4806 \$735.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 05/17 Last Active Po Box 965036 When was the debt incurred? 11/03/17 Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Charge Account

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Debtor 1 Geoppetto O. Robinson Case number (if know) 4.2 Syncb/hhgreg 2937 \$1,892.00 Last 4 digits of account number 3 Nonpriority Creditor's Name Attn: Bankruptcy Opened 09/16 Last Active Po Box 965060 When was the debt incurred? 5/26/17 Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge Account ☐ Yes 4.2 Syncb/home Design Sele 2019 \$1,438.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 10/16 Last Active Po Box 96060 When was the debt incurred? 11/09/17 Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge Account ☐ Yes 4.2 Syncb/Mattress Firm I \$2.015.00 2330 Last 4 digits of account number 5 Nonpriority Creditor's Name Opened 10/16 Last Active Po Box 965064 When was the debt incurred? 5/26/17 Orlando, FL 32896 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community lacksquare Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Charge Account

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Debtor 1 Geoppetto O. Robinson Case number (if know) 4.2 Synchrony Bank 1501 \$1,554.00 Last 4 digits of account number 6 Nonpriority Creditor's Name Attn: Bankruptcy Opened 10/16 Last Active Po Box 965060 When was the debt incurred? 6/10/17 Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge Account ☐ Yes 4.2 Synchrony Bank/HH Gregg 5347 \$1,349.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Opened 10/16 Last Active Po Box 965060 When was the debt incurred? 11/16/17 Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account ☐ Yes 4.2 Synchrony Bank/Walmart 1986 \$714.00 Last 4 digits of account number 8 Nonpriority Creditor's Name Opened 08/16 Last Active Attn: Bankruptcy Po Box 965060 When was the debt incurred? 5/26/17 Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No \square Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account ☐ Yes

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Case number (if know)

| Target | Last 4 digits of account number | 9393 | \$1,387.00 |
|---|--------------------------------------|---|------------|
| Nonpriority Creditor's Name Target Card Services Mail Stop NCB-0461 Minneapolis, MN 55440 | When was the debt incurred? | Opened 02/16 Last Active 5/26/17 | |
| Number Street City State Zlp Code | As of the date you file, the claim i | is: Check all that apply | |
| Who incurred the debt? Check one. | | | |
| ■ Debtor 1 only | ☐ Contingent | | |
| ☐ Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt | | ration agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | | |
| ■ No | Debts to pension or profit-sharin | | |
| Yes | Other. Specify Credit Card | <u> </u> | |
| Visa Dept Store National Bank/Macy's | Last 4 digits of account number | 3352 | \$970.00 |
| Nonpriority Creditor's Name Attn: Bankruptcy | | Opened 02/15 Last Active | |
| Po Box 8053 | When was the debt incurred? | 5/26/17 | |
| Mason, OH 45040 | _ | | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | is: Check all that apply | |
| ■ Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt | | aration agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | | |
| No | Debts to pension or profit-sharing | | |
| Yes | Other. Specify Charge Acc | count | |
| Wells Fargo Bank | Last 4 digits of account number | 2480 | \$4,939.00 |
| Nonpriority Creditor's Name | | Opened 1/20/47 Leet Active | |
| Po Box 10438 Macf8235-02f | When was the debt incurred? | Opened 1/29/17 Last Active 4/02/17 | |
| Des Moines, IA 50306 | | | |
| Number Street City State Zlp Code | As of the date you file, the claim i | is: Check all that apply | |
| Who incurred the debt? Check one. | | | |
| Debtor 1 only | ☐ Contingent | | |
| ☐ Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt | | ration agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | | |
| ■ No | Debts to pension or profit-sharing | | |
| ☐ Yes | ■ Other. Specify Credit Card | I | |

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you

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Debtor 1 Geoppetto O. Robinson

| have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons notified for any debts in Parts 1 or 2, do not fill out or submit this page. | | | | | | |
|--|---|---|--|--|--|--|
| Name and Address Chrysler Financial | On which entry in Part 1 or Part 2 did Line 4.21 of (<i>Check one</i>): | did you list the original creditor? □ Part 1: Creditors with Priority Unsecured Claims | | | | |
| PO Box 2993 Milwaukee, WI 53201-2993 | | ■ Part 2: Creditors with Nonpriority Unsecured Claims | | | | |
| | Last 4 digits of account number | | | | | |
| Name and Address | On which entry in Part 1 or Part 2 did you list the original creditor? | | | | | |
| Republic Bank Trust | Line 4.18 of (Check one): | ☐ Part 1: Creditors with Priority Unsecured Claims | | | | |
| P.O. Box 5369 Norman, OK 73070-5369 | | Part 2: Creditors with Nonpriority Unsecured Claims | | | | |
| | Last 4 digits of account number | | | | | |

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| | | | | Total Claim |
|--------------|-----|---|-----|-----------------|
| | 6a. | Domestic support obligations | 6a. | \$ 0.00 |
| Total claims | | | | |
| from Part 1 | 6b. | Taxes and certain other debts you owe the government | 6b. | \$ 0.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ 0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ 0.00 |
| | 6e. | Total Priority. Add lines 6a through 6d. | 6e. | \$ 0.00 |
| | | | | Total Claim |
| | 6f. | Student loans | 6f. | \$ 0.00 |
| Total claims | | | | |
| from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ 0.00 |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ 60,033.26 |
| | 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ 60,033.26 |

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| Fill in this information to identify your case: | | | | | | |
|---|-----------------|-------------------|-------------|--|--|--|
| Debtor 1 | Geoppetto O. Ro | binson | | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | | |
| United States Bankruptcy Court for the: | | NORTHERN DISTRICT | OF ILLINOIS | | | |
| Case number | | | | | | |
| (if known) | | | | | | |
| | | | | | | |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code | | | | contract or lease | State what the contract or lease is for |
|--|--------|--------|-------|-------------------|---|
| 2.1 | | | | | |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.2 | | | | | |
| | Name | | | | |
| | Number | Street | | | |
| | City | | State | ZIP Code | _ |
| 2.3 | Oity | | Ciaio | Zii Godo | |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.4 | | | | | |
| , | Name | | | | |
| | Number | Street | | | |
| | City | | State | ZIP Code | |
| 2.5 | | | | | |
| 2.0 | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| | Jity | | Cidio | | |

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| | | DOGUIIIE | en Paue 32 c | JI 30 | |
|--------------------------------|---|--|---------------------------|--|--|
| Fill in this | information to identify your | | | | |
| Debtor 1 | Geoppetto O. Ro | binson | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse if, filing | ng) First Name | Middle Name | Last Name | | |
| | ites Bankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| J | nee Danna aproj Godin ter aner | | | | |
| Case num | ber | | | | ☐ Check if this is an |
| | | | | | amended filing |
| O#:•:• | I Farma 40011 | | | | |
| | I Form 106H | -1.4 | | | |
| Sched | lule H: Your Cod | ebtors | | | 12/15 |
| ill it out, a our name | | boxes on the left. Attack . Answer every question | n the Additional Page t | o this page. On the top | eded, copy the Additional Page, of any Additional Pages, write |
| 1. 00 | you have any codebiors: (II | you are ming a joint case, | do not list either spouse | as a codebior. | |
| ■ No □ Yes | 3 | | | | |
| Arizon | hin the last 8 years, have you a, California, Idaho, Louisiana, Go to line 3. | | | | states and territories include |
| ☐ Yes | s. Did your spouse, former spor | use, or legal equivalent live | e with you at the time? | | |
| in line Form out Co | 2 again as a codebtor only i | f that person is a guaran | tor or cosigner. Make | sure you have listed the 6G). Use Schedule D, S | with you. List the person shown creditor on Schedule D (Official chedule E/F, or Schedule G to fill litor to whom you owe the debt |
| | Name, Number, Street, City, State and Z | IP Code | | Check all schedules | |
| 3.1 | | | | ☐ Schedule D, line | |
| | Name | | | ☐ Schedule E/F, lin | ne |
| | | | | ☐ Schedule G, line | |
| | Number Street | | | _ | |
| | City | State | ZIP Code | | |
| 2.0 | | | | Ochodula D. II | |
| 3.2 | Name | | | _ ☐ Schedule D, line☐ Schedule E/F, lin | |
| | | | | ☐ Schedule E/F, IIII | |
| - | Number Street | | | _ | |
| | City | State | ZIP Code | | |

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| | in this information t | | | | | | | | | |
|--|---|--|--|---|-----------|-------|--------------------------------------|----------------------|--|---------------------------|
| Deb | otor 1 | Geoppetto O | . Robinson | | | _ | | | | |
| | otor 2 ouse, if filing) | | | | | _ | | | | |
| Uni | ted States Bankrup | otcy Court for the: | NORTHERN DISTRIC | T OF ILLINOIS | | _ | | | | |
| | se number | | | | | | | ed filing ent sho | g owing postpetition he following date | |
| <u>O</u> 1 | fficial Form | 106I | | | | | MM / DD/ Y | YYY | | |
| So | chedule I: | Your Inco | ome | | | | , 22, . | | | 12/15 |
| spoi | use. If you are sep ch a separate she t1: Describ | parated and your et to this form. C e Employment | are married and not filir r spouse is not filing wi On the top of any addition | th you, do not incluonal pages, write yo | de inforr | natio | on about your spo case number (if | ouse. I knowr | lf more space is n). Answer ever | s needed, ry question. |
| | information. | | | Debtor 1 | | | | | on-filing spouse |) |
| If you have more the attach a separate print information about a | | page with | Employment status | ■ Employed□ Not employed | | | ☐ Emplo | • | ed | |
| | employers. | | Occupation | Retired | | | | | | |
| | Include part-time self-employed wo | | Employer's name | | | | | | | |
| | Occupation may or homemaker, if | | Employer's address | | | | | | | |
| | | | How long employed th | nere? | | | | | | |
| Par | t 2: Give De | tails About Mon | thly Income | | | | | | | |
| spou If yo | use unless you are | separated. spouse have mo | re than one employer, cohis form. | · | • | | | · | ŕ | ŭ |
| | | | | | | | For Debtor 1 | | Debtor 2 or n-filing spouse | 1 |
| 2. | List monthly gro deductions). If no | oss wages, salar ot paid monthly, c | y, and commissions (be alculate what the monthly | efore all payroll y wage would be. | 2. | \$ | 0.00 | \$_ | N/A | <u>\</u> |
| 3. | Estimate and lis | t monthly overti | me pay. | | 3. | +\$ | 0.00 | +\$ | N/A | <u>\</u> |
| 4. | Calculate gross | Income. Add line | e 2 + line 3. | | 4. | \$ | 0.00 | \$ | N/A | |

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| Debtor | Geoppetto O. Robinson | - | Cas | e number (if known) | | | |
|---------------|---|-----------|------------|---------------------|--------|--|----------|
| | | | Fo | or Debtor 1 | | Debtor 2 or Filing spouse | |
| (| Copy line 4 here | 4. | \$ | 0.00 | \$ | N/A | - |
| 5. L | List all payroll deductions: | | | | | | |
| 5 | 5a. Tax, Medicare, and Social Security deductions | 5a. | \$ | 0.00 | \$ | N/A | |
| 5 | 5b. Mandatory contributions for retirement plans | 5b. | \$ | 0.00 | \$ | N/A | - |
| 5 | 5c. Voluntary contributions for retirement plans | 5c. | \$ | 0.00 | \$ | N/A | _ |
| | 5d. Required repayments of retirement fund loans | 5d. | \$ | 0.00 | \$ | N/A | _ |
| | Se. Insurance | 5e. | \$ | 0.00 | \$ | N/A | - |
| | 5f. Domestic support obligations | 5f. | \$ | 0.00 | \$ | N/A | _ |
| | 5g. Union dues 5h. Other deductions. Specify: | 5g. 5h | \$ + \$ | 0.00 | + \$ | N/A | _ |
| | | _ | ٠. | 0.00 | · — | N/A | - |
| | Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | \$ | 0.00 | \$ | N/A | - |
| 7. (| Calculate total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$ | 0.00 | \$ | N/A | = |
| | List all other income regularly received: 3a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total | | | | | | |
| _ | monthly net income. | 8a. | | 0.00 | \$ | N/A | _ |
| | Bb. Interest and dividends | 8b. | \$ | 0.00 | \$ | N/A | _ |
| ٤ | Rec. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 8c. | \$ | 0.00 | \$ | N/A | |
| 8 | Bd. Unemployment compensation | 8d. | | 0.00 | \$ | N/A | _ |
| 8 | Be. Social Security | 8e. | \$ | 1,387.00 | \$ | N/A | _ |
| 8 | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: LINK / SNAP Benefits | 8f. | \$ | 116.00 | \$ | N/A | - |
| 8 | Bg. Pension or retirement income | _ 8g. | \$ | 0.00 | \$ | N/A | _ |
| 8 | Bh. Other monthly income. Specify: | _ 8h | + \$ | 0.00 | + \$ | N/A | - |
| 9. | Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$_ | 1,503.00 | \$ | N/A | Δ |
| 10 (| Calculate monthly income. Add line 7 + line 9. | 10. \$ | | 1,503.00 + \$ | | N/A = \$ | 1,503.00 |
| | Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | | | 1,505.00 | | - - - - | 1,000.00 |
| 11. \$ | State all other regular contributions to the expenses that you list in Schedule nclude contributions from an unmarried partner, members of your household, your other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not a Specify: | deper | | | | chedule J. 11. +\$ | 0.00 |
| ٧ | Add the amount in the last column of line 10 to the amount in line 11. The rest Write that amount on the Summary of Schedules and Statistical Summary of Certain applies | | | | | 12. \$ | 1,503.00 |
| 13. [| Do you expect an increase or decrease within the year after you file this form? No. | ? | | | | | y income |

Official Form 106I Schedule I: Your Income page 2

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| Fill in | this information to identify your case: | | | | |
|--------------|--|---|-----------------|--|-------------------------------|
| Debtor | Geoppetto O. Robinson | | | if this is: | |
| Debtor | or 2 | | _ | An amended filing A supplement show | ving postpetition chapter |
| (Spous | ise, if filing) | | | | the following date: |
| United | d States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLII | NOIS | <u></u> | MM / DD / YYYY | |
| Case r | number | | | | |
| (If kno | own) | | | | |
| Offi | icial Form 106J | | | | |
| Scl | hedule J: Your Expenses | | | | 12/1 |
| Be as inform | s complete and accurate as possible. If two married people a mation. If more space is needed, attach another sheet to this ber (if known). Answer every question. | | | | |
| Part 1 | 1: Describe Your Household Is this a joint case? | | | | |
| _ | ■ No. Go to line 2. | | | | |
| | Yes. Does Debtor 2 live in a separate household? | | | | |
| | □ No | | | | |
| | ☐ Yes. Debtor 2 must file Official Form 106J-2, Expense | es for Separate Housel | hold of Debto | or 2. | |
| 2. | Do you have dependents? ■ No | | | | |
| | Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent | Dependent's relation Debtor 1 or Debtor | | Dependent's age | Does dependent live with you? |
| | Do not state the | | | | □ No |
| C | dependents names. | | | | ☐ Yes |
| | | | | | □ No □ Yes |
| | | | | | □ No |
| | | | | | ☐ Yes |
| | | | | | □ No |
| 3. I | Do your expenses include ■ No. | | | | ☐ Yes |
| • | expenses of people other than | | | | |
|) | yourself and your dependents? | | | | |
| exper | Estimate Your Ongoing Monthly Expenses nate your expenses as of your bankruptcy filing date unless nses as of a date after the bankruptcy is filed. If this is a supicable date. | | | | |
| | de expenses paid for with non-cash government assistance alue of such assistance and have included it on Schedule I: | | | | |
| (Offic | cial Form 106l.) | | | Your expe | enses |
| | The rental or home ownership expenses for your residence. payments and any rent for the ground or lot. | Include first mortgage | 4. \$ | | 935.00 |
| ı | If not included in line 4: | | | | |
| 2 | 4a. Real estate taxes | | 4a. \$ | | 0.00 |
| 4 | 4b. Property, homeowner's, or renter's insurance | | 4b. \$ | | 0.00 |
| | 4c. Home maintenance, repair, and upkeep expenses | | 4c. \$ | | 0.00 |
| | 4d. Homeowner's association or condominium dues Additional mortgage payments for your residence, such as h | ome equity loans | 4d. \$ 5. \$ | | 0.00 0.00 |
| J. 1 | , talantionian into regardo paymonto for your regidence, 500/ d5 // | onio oquity Idalia | υ. ψ | | V.UU |

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| Deb | otor 1 | Geoppetto O. Robinson | Case num | ber (if known) | |
|-----|-----------------|--|----------|----------------|--------------------------------|
| 6. | Utilit | ies: | | | |
| - | 6a. | Electricity, heat, natural gas | 6a. | \$ | 70.00 |
| | 6b. | Water, sewer, garbage collection | 6b. | \$ | 0.00 |
| | 6c. | Telephone, cell phone, Internet, satellite, and cable services | 6c. | \$ | 0.00 |
| | 6d. | Other. Specify: Cell Phone | 6d. | \$ | 50.00 |
| | | Home Phone | | \$ | 45.00 |
| 7. | Food | and housekeeping supplies | | \$ | 200.00 |
| 8. | Child | Icare and children's education costs | 8. | \$ | 0.00 |
| 9. | Cloth | ning, laundry, and dry cleaning | 9. | \$ | 25.00 |
| 10. | Pers | onal care products and services | 10. | \$ | 25.00 |
| 11. | Medi | cal and dental expenses | 11. | \$ | 150.00 |
| 12. | | sportation. Include gas, maintenance, bus or train fare. | 10 | Ф. | 0.00 |
| 40 | | ot include car payments. | 12. | | |
| | | rtainment, clubs, recreation, newspapers, magazines, and books | 13. | | 0.00 |
| | | itable contributions and religious donations | 14. | > | 0.00 |
| 15. | | rance. of include insurance deducted from your pay or included in lines 4 or 20. | | | |
| | | Life insurance | 15a. | \$ | 0.00 |
| | | Health insurance | 15b. | | 0.00 |
| | | Vehicle insurance | 15c. | · | 0.00 |
| | | Other insurance. Specify: | 15d. | * | 0.00 |
| 16. | | s. Do not include taxes deducted from your pay or included in lines 4 or 20. | | · | 0.00 |
| | Spec | | 16. | \$ | 0.00 |
| 17. | Insta | Ilment or lease payments: | | - | |
| | 17a. | Car payments for Vehicle 1 | 17a. | \$ | 0.00 |
| | 17b. | Car payments for Vehicle 2 | 17b. | \$ | 0.00 |
| | 17c. | Other. Specify: | 17c. | \$ | 0.00 |
| | | Other. Specify: | 17d. | \$ | 0.00 |
| 18. | | payments of alimony, maintenance, and support that you did not report as | 10 | ¢. | 0.00 |
| 40 | | cted from your pay on line 5, Schedule I, Your Income (Official Form 106I). | 18. | | |
| 19. | | r payments you make to support others who do not live with you. | 19. | \$ | 0.00 |
| 20. | Spec | ny. r real property expenses not included in lines 4 or 5 of this form or on <i>Sch</i> e | | our Incomo | |
| 20. | | Mortgages on other property | 20a. | | 0.00 |
| | | Real estate taxes | 20b. | | 0.00 |
| | | Property, homeowner's, or renter's insurance | 20c. | · | 0.00 |
| | | Maintenance, repair, and upkeep expenses | 20d. | · | 0.00 |
| | | Homeowner's association or condominium dues | 20e. | | 0.00 |
| 21 | | r: Specify: | 21. | · | 0.00 |
| | 00 | | | - Ψ | 0.00 |
| 22. | | ulate your monthly expenses | | | |
| | | Add lines 4 through 21. | | \$ | 1,500.00 |
| | 22b. | Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 | | \$ | |
| | 22c. | Add line 22a and 22b. The result is your monthly expenses. | | \$ | 1,500.00 |
| 23 | Calc | ulate your monthly net income. | | | |
| _0. | | Copy line 12 (your combined monthly income) from Schedule I. | 23a. | \$ | 1,503.00 |
| | | Copy your monthly expenses from line 22c above. | 23b. | · | 1,500.00 |
| | | ,,,, | | | |
| | 23c. | Subtract your monthly expenses from your monthly income. | | | 2.22 |
| | | The result is your monthly net income. | 23c. | \$ | 3.00 |
| 24. | For ex modif | ou expect an increase or decrease in your expenses within the year after your cample, do you expect to finish paying for your car loan within the year or do you expect your car loan within the terms of your mortgage? | | | rease or decrease because of a |
| | ■ N | | | | |
| | ☐ Ye | es. Explain here: | | | |

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| Fill in this info | rmation to identify your | case: | | | |
|--------------------------------|---|---------------------------|--|---------------------------|---|
| Debtor 1 | Geoppetto O. Rol | | | | |
| Debior 1 | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | _ | |
| United States E | Bankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| Case number | | | | | |
| (if known) | | | | | ☐ Check if this is an |
| | | | | | amended filing |
| You must file thobtaining mone | nis form whenever you fi | n connection with a bankr | or amended schedules | . Making a false statemer | nt, concealing property, or r imprisonment for up to 20 |
| Sig | gn Below | | | | |
| Did you p | ay or agree to pay some | one who is NOT an attorn | ey to help you fill out b | pankruptcy forms? | |
| ■ No | | | | | |
| ☐ Yes. | Name of person | | | | cy Petition Preparer's Notice, I Signature (Official Form 119) |
| that they a X /s/ Ge Geop | eoppetto O. Robinson petto O. Robinson pressure of Debtor 1 | that I have read the sumn | nary and schedules file X Signature of | | nd |
| Date | March 20, 2018 | | Date | | |

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| Fill | in this infor | mation to identify you | r case: | | | | |
|---------------------|---|----------------------------------|---|---|----------------------|----------------|---|
| Del | otor 1 | Geoppetto O. Ro | phinson | | | | |
| | | First Name | Middle Name | Last Name | | | |
| | otor 2 ouse if, filing) | First Name | Middle Name | Last Name | | | |
| Uni | ted States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | | |
| | se number nown) | | | | | _ | neck if this is an nended filing |
| Sta Be a info | atement as complete rmation. If r | and accurate as possi | Affairs for Individual ble. If two married people a attach a separate sheet to stion | are filing together, both | are equally respon | sible for supp | |
| | | , | rital Status and Where You | ı Lived Before | | | |
| 1. | What is you | ır current marital statu | ıs? | | | | |
| | ■ Married □ Not ma | | | | | | |
| 2. | During the | last 3 years, have you | lived anywhere other than | where you live now? | | | |
| | ■ No □ Yes. Li | st all of the places you I | ived in the last 3 years. Do n | ot include where you live r | now. | | |
| | Debtor 1 P | rior Address: | Dates Debtor 1 lived there | Debtor 2 Prior | Address: | | Dates Debtor 2 lived there |
| 3. state | | | ver live with a spouse or leg lifornia, Idaho, Louisiana, Ne | | | | |
| | ■ No □ Yes. M | ake sure you fill out <i>Scl</i> | nedule H: Your Codebtors (O | fficial Form 106H). | | | |
| Par | t 2 Expla | in the Sources of You | r Income | | | | |
| 4. | Fill in the tot If you are fili No | al amount of income yo | nployment or from operatir u received from all jobs and a have income that you receiv | all businesses, including p | art-time activities. | revious calen | dar years? |
| | | | Debtor 1 | | Debtor 2 | | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of in | | Gross income (before deductions and exclusions) |

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Case number (if known)

Debtor 1 Geoppetto O. Robinson

| 5 | Did you receive any other income during this year or the two previous calendar years? |
|---|---|
| | |

Include income regardless of whether that income is taxable. Examples of *other income* are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

| Ш | l N | 10 |
|---|-----|----|
|---|-----|----|

Yes. Fill in the details.

| | Debtor 1 Sources of income Describe below. | Gross income from each source (before deductions and exclusions) | Debtor 2 Sources of income Describe below. | Gross income (before deductions and exclusions) |
|---|--|--|--|---|
| From January 1 of current year until the date you filed for bankruptcy: | Gambling | \$1.00 | | |
| | Social Security | \$4,163.40 | | |
| | Link | \$348.00 | | |
| | Contribution from Household Member | \$1.00 | | |
| For last calendar year: (January 1 to December 31, 2017) | Gambling | \$1.00 | | |
| | Social Security | \$16,327.20 | | |
| | Link | \$1.00 | | |
| | Contribution from Household Member | \$1.00 | | |
| For the calendar year before that: (January 1 to December 31, 2016) | Gambling | \$7,126.00 | | |
| | Social Security | \$1.00 | | |
| | Link | \$1.00 | | |
| | Contribution from Household Member | \$1.00 | | |

Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

| ο. | Are eitner | Deptor 1's | or | Deptor | 2 S | aepts | primarily | consumer | aepts? |
|----|------------|------------|----|--------|-----|-------|-----------|----------|--------|
| | | | | | | | | | |

No. **Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more?

□ No. Go to line 7.

Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

^{*} Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.

Case 18-08078 Doc 1 Filed 03/20/18 Entered 03/20/18 17:27:17 Document Page 40 of 58 Case number (if known) Debtor 1 Geoppetto O. Robinson Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Creditor's Name and Address **Dates of payment** Total amount Amount you Was this payment for ... paid still owe Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. Nο Yes. List all payments to an insider. **Insider's Name and Address** Dates of payment Total amount Amount you Reason for this payment paid still owe Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider Insider's Name and Address Dates of payment Total amount Amount you Reason for this payment Include creditor's name paid still owe Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. Nο ☐ Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address Describe the Property** Value of the Date property **Explain what happened** 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Nο ☐ Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount taken 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No

☐ Yes Official Form 107 Case 18-08078 Doc 1 Filed 03/20/18 Entered 03/20/18 17:27:17 Desc Main

Debtor 1 Geoppetto O. Robinson

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| Pa | rt 5: List Certain Gifts and Contributions | | | | | | | |
|-----|--|---|-----------------------------------|---------------------------|--|--|--|--|
| 13. | Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? ■ No □ Yes. Fill in the details for each gift. | | | | | | | |
| | Gifts with a total value of more than \$600 per person | Describe the gifts | Dates you gave the gifts | Value | | | | |
| | Person to Whom You Gave the Gift and Address: | | | | | | | |
| 14. | Within 2 years before you filed for bankrupt ■ No □ Yes. Fill in the details for each gift or cont | ccy, did you give any gifts or contributions with a tot | al value of more than | \$600 to any charity? | | | | |
| | Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) | | Dates you contributed | Value | | | | |
| Pa | rt 6: List Certain Losses | | | | | | | |
| 15. | Within 1 year before you filed for bankrupto or gambling? No Yes. Fill in the details. | y or since you filed for bankruptcy, did you lose any | thing because of the | ft, fire, other disaster, | | | | |
| | Describe the property you lost and how the loss occurred | escribe any insurance coverage for the loss clude the amount that insurance has paid. List pending surance claims on line 33 of Schedule A/B: Property. | Date of your loss | Value of property lost | | | | |
| Pa | rt 7: List Certain Payments or Transfers | | | | | | | |
| 16. | consulted about seeking bankruptcy or pre | cy, did you or anyone else acting on your behalf pay paring a bankruptcy petition? parers, or credit counseling agencies for services require | | erty to anyone you | | | | |
| | □ No ■ Yes. Fill in the details. | | | | | | | |
| | Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You | Description and value of any property transferred | Date payment or transfer was made | Amount of payment | | | | |
| | Ledford, Wu & Borges, LLC 105 W. Madison 23rd Floor Chicago, IL 60602 notice@billbusters.com | \$1,355.00 paid for Attorney Fee | 02/2018 - 03/2018 | \$1,355.00 | | | | |
| 17. | Within 1 year before you filed for bankrupto promised to help you deal with your creditor Do not include any payment or transfer that you | | or transfer any prope | erty to anyone who | | | | |
| | ☐ Yes. Fill in the details. | | | | | | | |
| | Person Who Was Paid Address | Description and value of any property transferred | Date payment or transfer was made | Amount of payment | | | | |

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Debtor 1 Geoppetto O. Robinson

| Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do include gifts and transfers that you have already listed on this statement. No | | | | | | | |
|---|--|---|--|--------------|--|-------------------------------|--|
| | Yes. Fill in the details. | | | | | | |
| | Person Who Received Transfer Address | Description and v property transferr | | payme | be any property or ents received or debts a exchange | Date transfer was made | |
| | Person's relationship to you | | | | | | |
| 19. | beneficiary? (These are often called asset-pro | | y property to a s | self-settled | d trust or similar device | of which you are a | |
| | No | | | | | | |
| | Yes. Fill in the details. | Description and o | alus of the man | | fanna d | Data Transfer was | |
| | Name of trust | Description and v | alue of the prop | erty trans | rerrea | Date Transfer was made | |
| Par | t 8: List of Certain Financial Accounts, Inc | struments, Safe Deposit | Boxes, and Sto | rage Units | S | | |
| 20. | Within 1 year before you filed for bankrupto | y, were any financial ac | counts or instru | ments hel | d in your name, or for y | our benefit, closed, | |
| | sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. | | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | |
| | Name of Financial Institution and | Last 4 digits of | Type of accour | nt or | Date account was | Last balance | |
| | Address (Number, Street, City, State and ZIP Code) | account number | instrument closed, sold, moved, or transferred | | | before closing or transfer | |
| 21. | Do you now have, or did you have within 1 y cash, or other valuables? | year before you filed for | bankruptcy, any | y safe dep | osit box or other depos | itory for securities, | |
| | ■ No □ Yes. Fill in the details. | | | | | | |
| | | Who also had soo | occ to it? | Dosoribo t | the contents | Do you still | |
| | Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | Who else had acc Address (Number, State and ZIP Code) | | Describe t | me contents | Do you still have it? | |
| 22. | Have you stored property in a storage unit of | or place other than your | home within 1 y | ear before | e you filed for bankrupto | cy? | |
| | No | | | | | | |
| | Yes. Fill in the details. | | | | | | |
| | Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | Who else has or h to it? Address (Number, State and ZIP Code) | | Describe t | the contents | Do you still have it? | |
| Par | t 9: Identify Property You Hold or Control | for Someone Fise | | | | | |
| 23. | | | ude any property | you borr | owed from, are storing f | or, or hold in trust | |
| | ■ No | | | | | | |
| | ☐ Yes. Fill in the details. | | | | | | |
| | Owner's Name Address (Number, Street, City, State and ZIP Code) | Where is the prop (Number, Street, City, S Code) | | Describe t | the property | Value | |
| Par | t 10: Give Details About Environmental Info | ormation | | | | | |
| For | the purpose of Part 10, the following definiti | ons apply: | | | | | |
| | | | | | | | |

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or Official Form 107

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Case number (if known) Document

Geoppetto O. Robinson Debtor 1

> toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,

| | haz | ardous material, pollutant, contaminant, | or similar term. | | | | | | |
|-----|--|--|--|-------|-----------------------------------|--------------------|--|--|--|
| Rep | ort a | all notices, releases, and proceedings tha | at you know about, regardless of wher | n the | ey occurred. | | | | |
| 24. | Has | Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? | | | | | | | |
| | | No | | | | | | | |
| | | Yes. Fill in the details. | | | | | | | |
| | | nme of site Idress (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | d | Environmental law, if you know it | Date of notice | | | |
| 25. | Hav | ve you notified any governmental unit of | any release of hazardous material? | | | | | | |
| | | No Yes. Fill in the details. | | | | | | | |
| | | nme of site Idress (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | d | Environmental law, if you know it | Date of notice | | | |
| 26. | Hav | ve you been a party in any judicial or adm | ninistrative proceeding under any envi | ironi | mental law? Include settlements a | nd orders. | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | | |
| | | se Title ise Number | Court or agency Name Address (Number, Street, City, State and ZIP Code) | Na | ture of the case | Status of the case | | | |
| Pai | t 11 | Give Details About Your Business or 0 | Connections to Any Business | | | | | | |
| | | hin 4 years before you filed for bankrupt | • | v of | the following connections to any | husiness? | | | |
| | **** | ☐ A sole proprietor or self-employed in | | • | | buomicoo . | | | |
| | | ☐ A member of a limited liability comp | • | | • | | | | |
| | ☐ A partner in a partnership | | | | | | | | |
| | ☐ An officer, director, or managing executive of a corporation | | | | | | | | |
| | | ☐ An owner of at least 5% of the voting | g or equity securities of a corporation | | | | | | |
| | | No. None of the above applies. Go to P | | | | | | | |
| | | Yes. Check all that apply above and fill | in the details below for each business | S. | | | | | |
| | | siness Name | Describe the nature of the business | | Employer Identification number | | | | |
| | | Idress Imber, Street, City, State and ZIP Code) | Name of accountant or bookkeeper | | Do not include Social Security r | number or IIIN. | | | |
| | | | | | Dates business existed | | | | |
| 28. | | hin 2 years before you filed for bankrupto titutions, creditors, or other parties. | cy, did you give a financial statement t | to ar | nyone about your business? Inclu | de all financial | | | |
| | | No | | | | | | | |
| | □ No | Yes. Fill in the details below. | Date Issued | | | | | | |
| | Name Address (Number, Street, City, State and ZIP Code) | | | | | | | | |

Part 12: Sign Below

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Case number (if known)

Debtor 1 Geoppetto O. Robinson

are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.

18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Geoppetto O. Robinson

Geoppetto O. Robinson

Signature of Debtor 2

Signature of Debtor 1

Date March 20, 2018

Date

Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

No

Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

No

Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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| Fill in this inform | nation to identify your | case: | | | I |
|---------------------------------------|--|---------------------|----------------------------------|--|---|
| Debtor 1 | Geoppetto O. Rok | | | | |
| Debtor 2 | First Name | Middle Name | Last | Name | |
| (Spouse if, filing) | First Name | Middle Name | Last | Name | |
| United States Bar | kruptcy Court for the: | NORTHERN DIST | TRICT OF ILLINOIS | 3 | |
| Case number | | | | | |
| (if known) | | | | | ☐ Check if this is an amended filing |
| | | | | | 1 |
| Official For | m 108 | | | | |
| | | n for Indiv | iduals Fil | ing Under Chapt | er 7 |
| | | | | | |
| | idual filing under chaן، claims secured by yo | | I out this form if: | | |
| | ed personal property a | | ot expired. | | |
| | er is earlier, unless th | | | | set for the meeting of creditors, he creditors and lessors you list |
| If two married peo | ople are filing together | in a joint case, bo | th are equally res _l | ponsible for supplying correct | information. Both debtors must |
| • | d date the form. | l. <i>K</i> | | | with a time of annual different manna |
| | nd accurate as possibur name and case nun | | s needed, attach a | separate sheet to this form. Or | n the top of any additional pages, |
| Part 1: List Yo | ur Creditors Who Have | Secured Claims | | | |
| For any credito information bel | | ert 1 of Schedule D | : Creditors Who H | lave Claims Secured by Proper | ty (Official Form 106D), fill in the |
| | ditor and the property th | nat is collateral | What do you into secures a debt? | tend to do with the property tha ? | at Did you claim the property as exempt on Schedule C? |
| | | | | | |
| | ells Fargo | | ☐ Surrender the | | □ No |
| name: | | | | roperty and redeem it. operty and enter into a | ■ Yes |
| | 366 W 17th Street (| • | Reaffirmation | n Agreement. | . 33 |
| property securing debt: | neights, it 00411 | COOK County | | operty and [explain]: make regular payments | |
| 3 | | | without reaffin | | _ |
| Part 2: List Yo | ur Unexpired Personal | Property Leases | | | |
| in the information | below. Do not list rea | l estate leases. Un | expired leases are | | red Leases (Official Form 106G), fill the lease period has not yet ended. 1/2). |
| | | | | , | |
| Describe your ur | nexpired personal prop | erty leases | | | Will the lease be assumed? |
| Lessor's name: Description of leas | sed | | | | □ No |
| Property: | | | | | ☐ Yes |
| Lessor's name: | | | | | □ No |
| Description of lease Property: | sea | | | | ☐ Yes |
| | | | | | |

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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| Debte | or 1 | Geoppetto O. Robinson | Case number (if known) |
|---------------|---------|--|---|
| | | | |
| | or's na | | □ No |
| Desc Prope | | of leased | |
| гюр | erty. | | ☐ Yes |
| Less | or's na | ame: | □ No |
| | • | of leased | |
| Prope | erty: | | ☐ Yes |
| Less | or's na | ame: | □ No |
| Desc Prope | • | of leased | _ |
| riope | erty. | | ☐ Yes |
| | or's na | | □ No |
| | | of leased | _ |
| Prope | erty. | | ☐ Yes |
| | or's na | | □ No |
| | | of leased | _ |
| Prope | erty. | | ☐ Yes |
| Part 3 | 3: | Sign Below | |
| | | alty of perjury, I declare that I have indicat at is subject to an unexpired lease. | my intention about any property of my estate that secures a debt and any personal |
| X | /s/ G | eoppetto O. Robinson | X |
| | | petto O. Robinson | Signature of Debtor 2 |
| | Signa | ture of Debtor 1 | |
| | Date | March 20, 2018 | Date |
| | | | |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | | Liquidation |
|------------|----|--------------------|
| \$24 | 45 | filing fee |
| \$7 | 75 | administrative fee |
| + \$ | 15 | trustee surcharge |
| \$33 | 35 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 18-08078 Doc 1 Filed 03/20/18 Entered 03/20/18 17:27:17 Desc Main Document Page 51 of 58

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

| In | re | Geoppetto O. Robinson | | Case No | |
|------|--|---|--|---|--------------------------------------|
| | | | Debtor(s) | Chapter | 7 |
| | | DISCLOSURE OF COMPEN | SATION OF ATTO | RNEY FOR D | DEBTOR(S) |
| 1. | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows: | | | | |
| | | For legal services, I have agreed to accept | | \$ | 1,355.00 |
| | | Prior to the filing of this statement I have received | | \$ | 1,355.00 |
| | | Balance Due | | \$ | 0.00 |
| 2. | \$_ | 335.00 of the filing fee has been paid. | | | |
| 3. | The | e source of the compensation paid to me was: | | | |
| | | ■ Debtor □ Other (specify): | | | |
| 4. | The | e source of compensation to be paid to me is: | | | |
| | | ■ Debtor □ Other (specify): | | | |
| 5. | | I have not agreed to share the above-disclosed compe | ensation with any other person | unless they are me | mbers and associates of my law firm. |
| | | I have agreed to share the above-disclosed compensate copy of the agreement, together with a list of the name | | | |
| 6. | . In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: | | | | case, including: |
| | b. c. | Analysis of the debtor's financial situation, and render Preparation and filing of any petition, schedules, state Representation of the debtor at the meeting of creditor [Other provisions as needed] Exemption planning; preparation and filing and filing of motions pursuant to 11 USC | ment of affairs and plan which is and confirmation hearing, a ing of reaffirmation agree | h may be required; and any adjourned h ments and applic | earings thereof; |
| 7. | Ву | agreement with the debtor(s), the above-disclosed fee Representation of the debtor in any disclose one chapter to another; reopening of a clostatement post-filing not due to Attorney failure to attend the meeting without a go | hargeability actions or an losed case; judicial lien a 's fault; and attending ad | y other adversar voidance; amend ditional creditors | ding a petition, list, schedule or |
| | | | CERTIFICATION | | |
| this | | ertify that the foregoing is a complete statement of any kruptcy proceeding. | agreement or arrangement fo | r payment to me for | representation of the debtor(s) in |
| | Mar | ch 20, 2018 | /s/ Kevin D. Rous | se ARDC | |
| | Date | | Kevin D. Rouse A Signature of Attorn Ledford, Wu & B | ey | |
| | | | 105 W. Madison 23rd Floor | | |
| | | | Chicago, IL 6060 | | |
| | | | 312-853-0200 Fa | | |
| | | | Name of law firm | | |

BILLBUSTERS

Ledford, Wu and Borges, LLC

Afformers at Law 4

105 W. Madison, 23rd Floor, Chicago, IL 60602 (312)853-0200 Fax: (312)873-4693

CONSULTATION AGREEMENT

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THIS AGREEMENT IS REQUIRED BY FEDERAL LAW (11 U.S.C. § 528(a))

- 1. Parties: In this contract, "Client" means the undersigned, both individually and jointly; "Attorney" means the law firm of Ledford, Wu & Borges, LLC and its staff attorneys.
- 2. Purpose: Client has requested the opportunity to consult with and obtain information and advice from Attorney concerning options for relief from debts, which may include filing bankruptcy. This agreement is for purposes of that consultation only.
- 3. Client's Duties: In order for Attorney to give meaningful advice, Client agrees to give accurate, honest, full and fair disclosure of financial information concerning income over the past three years from all sources, monthly living expenses, the type and amount of all debts (including names and addresses of all creditors), all assets and property owned by the client, wherever located and by whomever held, and any additional information determined by Attorney to be relevant.
- 4. Services: The attorney agrees to provide Client with the following services:
 - a. analyzing Client's financial circumstances based on information provided by Client;
 - b. to the extent possible, advising Client of bankruptcy options and non-bankruptcy options based on the information provided by Client;
 - c. if Client has not provided Attorney with sufficient information upon which to fully advise Client on Client's options, informing Client what additional information Client needs to provide in order to enable Attorney to provide such advice and information;
 - d. where applicable, advising Client of the requirements placed upon Client to file a bankruptcy; and
- e. to the extent possible, quoting a fee for providing bankruptcy and/or nonbankruptcy assistance to Client

 5. Fees (check one):

 A consultation fee will be waived if Client decides not to retain Attorney, in which case the attorney-client

Client agrees to pay \$_____ in nonrefundable consultation fee

relationship shall terminate at the conclusion of the interview

In the event Client decides to retain Attorney, this consultation becomes billable and is covered by the legal fee charged for the case, and a new written contract, as well as a Court-Approved Retention Agreement if applicable, must be signed by Client and Attorney, which shall supersede this agreement. The new agreement(s) will also provide a detailed explanation of the parties' obligations and a breakdown of the costs.

6. Acknowledgement: Client acknowledges that the first date upon which Attorney provided any bankruptcy assistance to Client is the date noted above, and that Attorney provided Client with a copy of this agreement and the disclosure and information mandated by Section 527(b) of the Bankruptcy Code.

Attorney Signature: 25/12—ARDC #: 25/39-9

LEDFORD, WU & BORGES, LLC

105 W. Madison, 23rd Floor, Chicago, IL 60602

(312) 853-0200 Fax: (312) 873-4693

ATTORNEY RETENTION CONTRACT

FOR OFFICE USE (7) Client No. Responsible attorney:

| 1. Parties. In this contract, "Client" means the undersigned, both individually and jointly; "Attorney" means the law firm of Ledford, Wu & Borges, LLC. and its staff attorneys. This contract shall supersede any prior contracts and agreements between the parties to the extent of any inconsistencies. |
|---|
| 2. Services and Fees: Client retains Attorney for the following services: Chapter 7: (Split Fee): Client retains Attorney to counsel and represent Client for all purposes in the bankruptcy case, subject to exceptions in section 3. However, Attorney's representation of Client is conditioned on Client entering into an agreement after the filing of the case to pay Attorney for services rendered after the filing of the case. Should Client fail to enter into such an agreement, the court may allow Attorney to withdraw from representation of Client on motion of Attorney. |
| Pre-filing Legal Fees \$ Pre-filing Expenses \$ Filing Fee \$335.00/Installments: Total Pre-Filing \$ It is anticipated that Client will enter into a post-filing agreement with Attorney for representation through bankruptcy discharge. Client acknowledges that there is no obligation to enter into such an agreement and that any anticipated fees are not agreed to at this time. |
| Anticipated Post-Filing Fees & Expenses (A separate post-filing contract is required): \$ |
| The legal fee is an wadvance payment retainer we security retainer with a classic or security retainer, as that would be within the reach of Client's creditors. Should hourly billing be necessary, Attorney's billing rates are \$350-\$400/hour for partners, \$300/hour for associates, and \$90/hour for law clerks. The filing fee, expenses |
| and billing rates subject to change at any time. The legal fee covers the initial consultation and all subsequent work agreed to above. All pre-filing fees above are to be paid in full before filing. The case may be closed if the fees are not paid timely. Additional legal fees and court costs may apply and a separate contract may be required, in the event of conversion from one chapter to another, amending required documents, attending additional creditors' meetings, reopening of a closed case, unnecessary work caused by Client's delay, or any other fact not known to Attorney in writing at the time of the initial consultation that complicates the case. An NSF check or chargeback will be assessed a \$40 fee. |
| 3. Scope of Representation: (a) Attorney will counsel and represent Client in all aspects of the above matter as elected in Paragraph 2 EXCEPT: (1) adversary proceedings; (b) Attorney may agree, but is not obligated, to represent Client in the above excluded matters for an additional fee, to be agreed upon separately by the parties with a separate retention agreement. |
| 4. Initial Consultation. Client acknowledges that Attorney has explained the following (please initial): The options of Chapter 7 and Chapter 13 and that Client has made the choice identified in Paragraph 2 The concepts of exemption, discharge and dischargeability, and pre-filing and post-filing procedures The difference among various types of retainer and that Client has made the choice identified in Paragraph 4 TIME IS OF THE ESSENCE. Any delay on Client's part may disqualify Client for the type of relief elected or otherwise adversely affect Client's case. Attorney may not be able to file the case, or take other necessary actions, until all requested documents and/or information, including but not limited to a certificate of credit counseling, are received by Attorney Client understands that the advice given during the initial consultation is preliminary and based on the information available at the time, and may change as the case is further analyzed, more facts discovered, or Client's circumstances or the law changed. |
| 5. Client's Duties. Client agrees, during the course of representation, to: (a) provide Attorney with full, accurate and timely information, financial and otherwise; (b) follow Attorney's procedures and cooperate with Attorney in providing requested documents; (c) promptly inform Attorney of any change of address, phone number, e-mail address or employment, or activation of military duty; (d) inform Attorney before buying, selling, refinancing or transferring any real or personal property in which incurring any debt, including but not limited to applying for any loan, credit card or line of credit, or using an existing credit card; and incurring inform Attorney if Client becomes entitled to an inheritance, an asset as a result of a property settlement agreement with Client's spouse or a divorce decree, life insurance proceeds, or a monetary judgment, award or settlement. |
| of the following outside counsel, at Attorney's expense, to work on this case: Kaunteen w. Vaught, Reny in South States, at Attorney's expense, to work on this case: Kaunteen w. Vaught, Reny in South States, at Attorney Banyon, David Hall Carter, Derek V. Lofland and/or |
| may terminate the representation as permitted by the Illinois Rules of Professional Conduct and Botal Bath, apply and the bankruptcy case is advance payment for future services, becomes Attorney's property upon receipt, and is nonrefundable upon filing of the petition. In the event the representation is terminated by either party before filing and Client has paid Attorney more than \$300, Attorney will provide Client with a detailed itemization of the services rendered in support of any fee charged at the rate set forth in Paragraph 2, Client will reimburse Attorney for any expenses, including those that otherwise would be free of charge, and Client authorizes Attorney to apply the filing fee and any payment for expenses that have not been incurred towards the attorney's fee, subject to the requirements set forth herein. A retainer |
| in the amount of \$300 or less is nonrefundable. X ARDC # 1284394 Date: 2 / 13 / 18 |
| Attorney signature: Attorney signature: Copyright © 2018 Ledford, Wu & Borges, LLC |

United States Bankruptcy CourtNorthern District of Illinois

| In re | Geoppetto O. Robinson | | Case No. | |
|-------|--|---|-----------------|---------------------------|
| | | Debtor(s) | Chapter | 7 |
| | VE | RIFICATION OF CREDITOR M. | ATRIX | |
| | | Number of 0 | Creditors: | 36 |
| | The above-named Debtor(s) (our) knowledge. | hereby verifies that the list of creditor | ors is true and | correct to the best of my |
| Date: | March 20, 2018 | /s/ Geoppetto O. Robinson Geoppetto O. Robinson Signature of Debtor | | |

Geoppetto O. Robinson 366 W. 17th Street Chicago Heights, IL 60411

Kevin D. Rouse ARDC Ledford, Wu & Borges, LLC 105 W. Madison 23rd Floor Chicago, IL 60602

American General Finance Attn: Legal Department 1999M1139454 20 N. Clark St., Suite 2600 Chicago, IL 60606

Capital One Attn: General Correspondence/Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Cardworks/CW Nexus Attn: Bankruptcy Po Box 9201 Old Bethpage, NY 11804

Cbusasears Citicorp Credit Srvs/Centralized Bankrup Po Box 790040 Saint Louis, MO 63179

Chrysler Financial PO Box 2993 Milwaukee, WI 53201-2993

Comcast PO Box 3001 Southeastern, PA 19398

Comenity Bank/Carsons Po Box 182125 Columbus, OH 43218

Comenity Capital Bank/HSN Attn: Bankruptcy Po Box 182125 Columbus, OH 43218

First National Credit Card/Legacy First National Credit Card Po Box 5097 Sioux Falls, SD 51117

First Premier Bank 601 S Minnesota Ave Sioux Falls, SD 57104

First Savings Credit Card Po Box 5019 Sioux Falls, SD 57117

Guardian Protection Services 174 Thorn Hill Road Warrendale, PA 15086

Jared-galleria/genesis 15220 Nw Greenbrier, Ste Beaverton, OR 97006

Kay Jewelers Attn: Bankruptcy Po Box 1799 Akron, OH 44309

Kohls/Capital One Kohls Credit Po Box 3120 Milwaukee, WI 53201

Lendup Card Services I 225 Bush St Ste 1100 San Francisco, CA 94104

Midnight Velvet Swiss Colony/Midnight Velvet 1112 7th Ave Monroe, WI 53566

NCB Attn: Bankruptcy One Allied Dr Trevose, PA 19053 Nissan Motor Acceptanc Po Box 660360 Dallas, TX 75266

Qvc 1200 Wilson Drive West Chester, PA 19380

Republic Bank Trust P.O. Box 5369 Norman, OK 73070-5369

Santander Consumer USA 5201 Rufe Snow Drive Suite 400 North Richland Hills, TX 76180

Syncb/car Care Midas Po Box 965036 Orlando, FL 32896

Syncb/hhgreg Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Syncb/home Design Sele Po Box 96060 Orlando, FL 32896

Syncb/Mattress Firm I Po Box 965064 Orlando, FL 32896

Synchrony Bank Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Synchrony Bank/HH Gregg Attn: Bankruptcy Po Box 965060 Orlando, FL 32896 Synchrony Bank/Walmart Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Target Card Services Mail Stop NCB-0461 Minneapolis, MN 55440

Visa Dept Store National Bank/Macy's Attn: Bankruptcy Po Box 8053 Mason, OH 45040

Wells Fargo P.O.Box 5943 Sioux Falls, SD 57117-5943

Wells Fargo Collection Servicing 1 Home Campus Des Moines, IA 50328

Wells Fargo Bank Po Box 10438 Macf8235-02f Des Moines, IA 50306